

CLAIMS ONLY

INVENTOR: _____ FILE NO. DATE: _____
 ATTORNEY: _____

CLAIMS						
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

	★		★		★	
	IND	DEP	IND	DEP	IND	DEP
51						
52	✓					
53	✓					
54	✓					
55						
56	✓					
57	✓					
58	✓					
59	✓					
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63	✓					
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS